P05000157772

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	= #)
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Naya Garcia-Durai	n, P.A.	
DOCUMENT NUM	P05000157772		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Naya Karina Duran		
	- · · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	n
	Naya Karina Duran, P.A.		
		Firm/ Company	
	2780 North University Drive		
		Address	
	Coral Springs, Florida 33065		
		City/ State and Zip Cod	e
nayd	ur@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Naya Karina Duran		at (<u>754</u>	368-0942
Name of Contact Person		Area Co)ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisi Cliftor	Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Naya Garcia-Duran, P.A.		5
(Name	of Corporation as currently filed with the Florida Dept. of State)	B 35
P05000157772		- B
	(Document Number of Corporation (if known)	TR. C
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the fo	llowing amendmen
A. If amending name, enter the new na	ame of the corporation:	
Naya Karina Duran, P.A.		The new
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	the abbreviation must contain the
C. Enter new mailing address, if application (Mailing address MAY BE A POST)		
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office address in Florida, enter the name of the wregistered office address:	
Name of New Registered Agent	Naya Karina Duran	
Name of New Neglatered Agent	2780 North University Drive	
	(Florida street address)	
New Registered Office Address:	Coral Springs . Florida 33	3065
ren negaleren enter raavesa.	(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as registed.	changing Registered Agent: tered agent. I am familiar with and accept the obligations of the pos	ition.
	Signature of New Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) X Change	PTSD	_	Naya Karina Duran	2780 North University Drive
Add				Coral Springs, Florida 33065
Remove				
2) Change				
Remove				
3)Change				
Add				
Remove				
4) Change		_		
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
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If an amandment provides for an eval	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij noi appaeavie, maicaie ivin)	

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	•	
Effective date if applicable:	ember 15, 2016	
in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, th partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendm fficient for approval.	ient(s)
☐ The amendment(s) was/were approvided for	roved by the shareholders through voting groups. The following staeach voting group entitled to vote separately on the amendment(s):	ntement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and share	holder
action was not required. December Dated Signature (By a diselected)	irector president or other officer — if directors or officers have not be a fiduciary by that fiduciary) Naya Karina Duran (Typed or printed name of person signing)	oeen
	President, Treasurer, Secretary and Director	
	(Title of person signing)	